

Richmond Police Department

**Alarm
&
Vacant Property
Form**

Name_____ Date_____

Street Address_____ Phone Number_____

Length of Time property will be vacant. FROM_____ TO_____.

Key holder for your property_____

Keyholder's Address_____ Phone number_____

Do you have an alarm?_____ Will the alarm be activated?_____

Who is your Alarm Company_____

Key Holder for Alarm_____ Phone #_____

Will there be any vehicles in the yard? Make_____ Model_____

Person to call if there is a problem_____ Phone number_____

Any additional information (ie lights on timer, someone coming to feed pets (etc.))

Richmond PD Fax Number – 603-239-6007
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